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APPLICANTS

Denis Francois Hochstrasser, Geneva, SWITZERLAND;
Jean-Charles Sanchez, Geneva, SWITZERLAND;
Elisabeth Guillaume, Annemasse, FRANCE;

** CONTINUING DATA **

This application is a CIP of PCT/EP02/10063 09/03/2002 *FR*

** FOREIGN APPLICATIONS **

UNITED KINGDOM 01 21459.2 09/05/2001 *FR*
UNITED KINGDOM 02 25245.0 10/30/2002
UNITED KINGDOM 03 06290.8 03/18/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 03/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWITZERLAND	SHEETS DRAWING 49	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 17
35 USC 119 (e-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Not after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS
21003
BAKER & BOTTS
30 ROCKEFELLER PLAZA
NEW YORK, NY
10112

TITLE

Diagnostic method for transmissible spongiform encephalopathies

FILING FEE

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)